REMARKS

In the Office Action dated October 8, 2004, claims 1-5 and 12 were rejected under 35 U.S.C. §102(e) as being anticipated by Wong. Claims 6-11 and 13 were rejected under 35 U.S.C. §103(a) as being unpatentable over Wong.

These rejections are respectfully traversed for the following reasons.

The subject matter disclosed and claimed in the present application concerns a method and an apparatus for introducing a component into a medical installation that has a moveable patient bed, making use of the moveable patient bed that is already present for the purpose of moving the structural component relative to the medical installation.

For this purpose, in the method and apparatus disclosed and claimed in the present application, a two-part guide system is employed, formed by a guide rail and a guide groove. The guide system is disposed on the patient bed (the patient bed being a separate component from the guide system and a separate component from the structural component that is to be installed into or removed from the medical installation). The structural component to be installed into the medical installation is then placed on the guide system on the patient bed. The patient bed is already height-adjustable, and thus includes a lifting mechanism. This same lifting mechanism that is used to adjust the patient bed in height is then used to lift the structural component into an appropriate position for installation into the medical installation. Thus, a separate, duplicative lifting apparatus for the structural component is not necessary.

The above-described procedure is executed in reverse when the structural component is to be removed from the medical installation.

The Wong reference discloses a hospital bed that is compatible with open geometry portable CT scanners. The hospital device disclosed in the Wong reference is described in the context of two embodiments, which are summarized in the two paragraphs at column 2, lines 39-67 of the Wong reference. In one embodiment, the patient bed has an extendible center portion that slides between two lateral portions of the patient bed. With the patient on this center portion, the center portion can be extended, by sliding, longitudinally from between the lateral portions, so that a more narrow patient support is created that can be better accommodated in certain types of medical scanners. This center portion, however, is still an integral part of the patient bed, and is not a component separate from the patient bed. There is no structure in the Wong reference to allow attachment of a component separate from the patient bed to the patient bed, and then to use the height-adjustment structure that already exists in the patient bed for the purpose of installing that separate component in a medical installation, as disclosed and claimed in the present application.

In the other embodiment, the patient bed disclosed in the Wong reference has a stretcher-type unit that can be removed from the patient bed to transport a patient on the stretcher between the patient bed and, for example, an emergency vehicle.

In the first embodiment, the slideable narrow portion of the patient bed is not detachable from the remainder of the patient bed, and would be inoperable if it were, since it requires continuous engagement with the patient bed in order to be supported at both ends. In the second embodiment, although the stretcher is removable from the remainder of the patient bed, there is no structure associated with the stretcher that would allow it to be used to introduce any component into a medical installation. In fact, use of the stretcher in such a manner would be

counterproductive, because then the height-adjusting structure associated with the patient bed could not be used to introduce the component, since the stretcher would have been removed from that height-adjusting structure.

Independent claims 1, 12 and 13 had been amended consistent with the above discussion, to make clear that the component that is introduced into or removed from the medical installation is a component that is separate from the patient bed. Moreover, the claims have been amended to make clear that the guide system allows temporary, detachable engagement of the guide system and/or the structural component with respect to the patient bed.

The Wong reference does not even disclose or suggest the concept of making use of the height-adjustment structure that is already present in a patient bed for the purpose of introducing another component, separate from the patient bed into a medical installation. The Wong reference, therefore, does not disclose all of the elements of independent claim 1, nor the method steps of independent claim 12, as arranged and operating in those claims. The Wong reference, therefore, does not anticipate either of claims 1 and 12. Claims 2-5 add further structure to the novel combination of claim 1 and are therefore not anticipated by the Wong reference for the same reasons discussed above in connection with claim 1.

Since the Wong reference, as noted above, does not even suggest the concept of making use of the height-adjustment structure that is already present in a patient bed for the purpose of introducing a component separate from the patient bed into a medical installation, the subject matter of claims 6-11 and 13 would not have been obvious under the provisions of 35 U.S.C. §103(a) to a person of ordinary skill in the relevant technology based on the teachings of the Wong reference.

Applicants therefore submit all claims of the application are in condition for allowance, and early reconsideration of the application is respectfully requested.

Submitted by,

Steven H. Noll (Reg. 28,982)

Schiff, Hardin LLP
CUSTOMER NO. 26574
Patent Department
6600 Sears Tower
233 South Wacker Drive
Chicago, Illinois 60606
Telephone: 312/258-5790
Attorneys for Applicant.

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450 on December 28, 2004.

Steven H. Noll

STEVEN H. NOLL

CH1\ 4215745.1